



# PARTNER TO THE WOR



# LD'S POOR

By Amy Mayer '94

2008

ALUMNAE ACHIEVEMENT AWARDS

OPHELIA DAHL CE/DS '94



WHEN OPHELIA DAHL CE/DS '94 looks back on herself at 18, she sees a young woman

with natural curiosity, a sense of adventure, abundant good will, myriad interests—and no direction. At the time, she sat down with her father, children's book author Roald Dahl, and told him she wanted to volunteer in some capacity for a spell. He recommended some leads to pursue, and that's how, in the spring of 1983, she left the English countryside for Haiti.

"I had no skills. None, none, none," she says now. The poverty, the ramshackle medical facilities, and the stark contrast to all that she'd known growing up presented her with an intense desire to do something but no idea what that something might look like. She remembers "being vulnerable, or open, to being moved by a situation." Indeed, the situation propelled her into a life's work.

Since then, Dahl has been engaged in bringing top-quality health care to impoverished populations in

Haiti and, more recently, to a host of other locations. She is the executive director and chair of the board of Partners In Health, a Boston-based nonprofit that she cofounded with several doctors in the late 1980s. Early on, the focus was only Haiti, the funding came largely from one donor, and the daily operations were handled out of a Cambridge apartment. For the fiscal year 2008, the organization's budget for programs and services was nearly \$52 million. PIH has received grants from

Ophelia Dahl, photographed at the Partners In Health offices in Boston by Richard Howard

major organizations such as the Bill and Melinda Gates Foundation and the Global Fund to Fight AIDS, Tuberculosis, and Malaria, though it still relies heavily on individual donors. It now works with patients in Peru, Russia, Lesotho, Malawi, Rwanda, and Boston's inner city, in addition to its flagship project in Haiti. In 2007, PIH logged over two million patient visits worldwide.

Dahl's workday can involve meeting with other health-care activists in a Boston conference room, listening to a presentation from biologists working on new AIDS treatments, or checking in with PIH staffers from around the world via teleconference. But she's also likely to place phone calls to personally court major donors or to hop a plane to Haiti or Rwanda. And when she's in those countries or others, she spends some time talking with local bureaucrats, doctors, and community-health workers but also walks the patient wards. She has said that many before her taught her not to avert her gaze from the destitute and that generous funders have made it possible for her to do something about the images from which she has refused to turn away.

While PIH was still rather small, Dahl helped run it part-time and decided to pursue a degree. She had just moved to Massachusetts, and a longtime family friend, Sonia Grace Austrian '54, encouraged her to consider Wellesley. At 24, Dahl was just old enough for the Davis Scholars program.

"I'd done a couple of different A levels [pre-university courses in England], thinking I wanted to go to medical school," she says. But once she enrolled at Wellesley, she realized she didn't have to slog through the premed courses that didn't interest her, because she could continue her work without becoming a clinician herself. She chose English as a major, she says, "because I love it," and this change "was an extremely liberating thing."

Though she has learned most of what she does on the job,

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growing into her responsibilities as the organization expanded, she credits her Wellesley education with preparing her to assume the changing leadership role.

"There is a kind of academic rigor there that I found to be enormously helpful in the next phase of my life," she says. Any time she made a point in a class discussion or in a paper, she says, she knew she was expected to support it. From that, she came to appreciate the importance of accountability.

Author Tracy Kidder spent about three years trailing Dahl's colleague, PIH cofounder Paul Farmer, for the 2003 book *Mountains Beyond Mountains: the Quest of Dr. Paul Farmer, a Man*

*Who Would Cure the World*. In the process, Kidder got to know Dahl. He says she possesses an impressive ability to easily travel between her life in the United States and England and the radically different conditions of PIH's patients in the developing world.

"Part of the secret of doing that successfully is knowing when to be quiet. She's a really good listener," Kidder says. And, she's "always tactful and diplomatic and courteous."

Farmer echoes how important some core personality traits are to Dahl's role within PIH.

"Ophelia is the type of leader who is strong but never overbearing, sympathetic and eternally rational; she is fair and kind," Farmer wrote in a letter to the Alumnae Achievement Awards committee. He also wrote of the transformation of PIH into a global player in the arena of health care and social justice.

"This agenda was not designed to win her friends in high places or to win her awards: It was designed to remain true to the lessons she learned in Haiti and to the need that she saw while spending month after month visiting the houses, the huts, of the rural poor in mountainous central Haiti."

Dahl seems to have an innate sense of what the best course of action is in a given situation, though, of course, this sense is largely derived from her many years of experience. She says where PIH has been a catalyst for change, it has generally worked within systems—usually the ministries of health in the host countries. But sometimes more overt, demonstrative action is necessary. She remembers traveling to Washington, D.C., in a rented van with a dozen Haiti supporters to protest outside a major international lending institution that had frozen loans to the small country. A week later, she returned, in a business suit, for a scheduled meeting.

The vision of PIH stresses doing "whatever it takes." The organization has a mission that is both medical and moral, its vision statement says. Health care alone, while critical, isn't necessarily enough. Lower drug-pricing regimes, clean drinking water and adequate food and shelter, political change—all of these things may be necessary to fulfill the goal of improving the well-being of patients and communities. PIH strives to do everything possible to help someone "just as we would do if a member of our own family—or we ourselves—were ill."

In her shared office in the shabby, Harvard-owned space PIH occupies rent-free, Dahl sits among books and photographs. There are pictures of Tom White, the benefactor who contributed start-up capital and significant additional funds to PIH. Several framed photos of children at PIH sites are on one wall and a note from a child is displayed in a frame decorated with a die, a safety pin, and other common items. On this day, the PIH team is trying to get a 19-year-old woman in Lesotho onto a medical flight to Addis Ababa, Ethiopia. The woman is suffering from multiple fistulas, complications that arose after she gave birth in a hospital that wasn't equipped to perform a cesarean. Now, the woman is unable to sit and, therefore, to board a commercial flight. The hospital in Addis



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—PIH cofounder Paul Farmer

Ababa specializes in the kind of surgery she needs and has offered to perform it at no cost. But PIH is seeing estimates of \$50,000 to \$100,000 for the necessary medical flight. Dahl is simultaneously working to find a cheaper flight and assessing which PIH donors might be willing to quickly come through with the necessary funds.

What sets PIH apart from other organizations is that the plight of the individual takes center stage. Dahl says she is endlessly frustrated by questions of cost effectiveness. When PIH launched its Boston program to provide services to HIV-positive patients who were essentially falling through the cracks in the existing health-care system, she says fund-raising proved tough. Community health workers are at the center of the PIH approach to providing care and supporting patients. But paying one in Boston costs far more than paying one in a place where the cost of living—and most everything else—is much lower. Dahl says potential donors balked at the expense. She maintains that the price tag, which she describes as the cost of keeping a person alive, “is an incredible value.”

The fact that PIH is not equipped to accept the goodwill of able-bodied, unskilled volunteers such as Dahl was in 1983 is “kind of painful to me,” she says. But it has established a program with Brigham and Women’s Hospital that allows residents to divide their time between the Boston hospital and PIH project sites. The Brigham and Women’s Division of Social Medicine and Health Inequities is one of three prominent institutions that have aligned themselves with PIH; the others are the Program in Infectious Disease and Social Change at Harvard Medical School and the François-Xavier Bagnoud Center for Health and Human Rights at the Harvard School of Public Health.

“We want to, in a way, institutionalize” global public health and global health delivery, Dahl says.

Remembering her first trip to Haiti 25 years ago, Dahl says, “If I could have been transported back in time to the countryside of England, I probably would have pushed that button.” It’s the kind of magic escape button that, fortunately, only exists in the fantasy worlds of her father’s books: In 2006, the accomplishments of a once-unfocused student came full circle, as Dahl gave the commencement address at Wellesley, received an honorary degree from Regis College and, along with Farmer, was awarded the Union Medal from the Union Theological Seminary in New York. When she accepted her Alumnae Achievement Award in February, she became the first Davis Scholar to do so. She had been in Haiti earlier that week.

If at 18, Dahl lacked a clear goal, the years since have demonstrated that she has not only dedicated herself to a noble cause but that she has done so with singular purpose and tremendous success. And because of the work of Dahl, her colleagues, and their financial supporters, that young mother in Lesotho joins a vast list of patients whose health and lives have been improved thanks to PIH.

Twenty-five years after her first trip to Haiti, Dahl remains wholly absorbed by the health-care needs of the poor. Kidder says the spirit that infects Dahl demonstrates her unwavering commitment to her work. Of Dahl and her colleagues, he says, “They don’t wake up in the morning wondering whether they’re doing what they ought to be doing.”

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*An audio recording of Dahl's Achievement Awards speech can be found at <http://itunes.wellesley.edu>.*